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26096 CARLSON, G 400 WEST MA SUITE 350	7590 06/1: ASKEY & OLDS PLE ROAD	172008 B, P.C.	Par	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
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			TRABLE	120	10112000	(Signature)
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APPLICATION NO.	FILING DATE	<u> </u>	FIRST NAMED INVENTO	R A	TTORNEY DOCKET NO.	CONFIRMATION NO.
10/810,796 03/26/2004 Ned Emidio Cipollini 67097-020;EH-11085 9784 TITLE OF INVENTION: ELECTROCHEMICAL FUEL DEOXYGENATION SYSTEM						
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUB	PUBLICATION FEE DUE	PREV. PAID ISSUE F	EE TOTAL FEE(S) DUE	DATE DUE
- nonprovisional	ЙO	\$1440	\$300	\$0	\$1740	09/15/2008
EXAMINER · ART UNIT		CLASS-SUBCLASS] .		•	
PHASGE, ARUN S		1795	205-687000	-		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)						
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.						
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
United Technologies Corporation Hartford, CT						
Please check the appropriate assignee category or categories (will not be printed on the patent): Individual D'Corporation or other private group entity Government						
4a. The following fee(s) are submitted: 41 42 43 44 45 46 46 47 48 49 40 40 40 40 40 40 40 40 40			b. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 21-0279 (enclose an extra copy of this form).			
• •	SMALL ENTITY Statu	s. Sec 37 CFR 1,27.	☐ b. Applicant is no lor	nger claiming SMALL	ENTITY status. See 37 C	FR 1.27(g)(2).
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Authorized Signature			Date 8-27-08			
Typed or printed name David L. Wisz Registration No. 46,350						

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PTOL-85 (Rev. 08/07) Approved for use through 08/31/2010.

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PAGE 1/1 * RCVD AT 8/27/2008 10:21:11 AM [Eastern Daylight Time] * SVR:USPTO-EFXRF-5/43 * DNIS:2732885 * CSID:12489888363 * DURATION (mm-ss):00-58

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